

REDACTED- FOR PUBLIC INSPECTION

June 26, 2014

VIA OVERNIGHT DELIVERY

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, DC 20554

RE: **Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission**

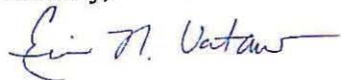
Dear Ms. Dortch:

Farmers Mutual Telephone Company ("FMTC"), a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sincerely,



Eric N. Votaw, Senior Manager
For Moss Adams LLP

Enclosures

.cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division
Daniel Greig – General Manager Farmers Mutual Telephone Company

FCC Form 481 - Carrier Annual Reporting
Data Collection Form

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name: Person USAC should contact with questions about this data	Eric N. Votaw
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	eric.votaw@mossadams.com

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
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		(check box when complete)	
<100>	Service Quality Improvement Reporting (complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<200>	Outage Reporting (voice) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input checked="" type="checkbox"/> -- check box if no outages to report	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<300>	Unfulfilled Service Requests (voice) 0	<input type="checkbox"/>	<input type="checkbox"/>
<310>	Detail on Attempts (voice) (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<320>	Unfulfilled Service Requests (broadband) 0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<330>	Detail on Attempts (broadband) (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<400>	Number of Complaints per 1,000 customers (voice)	<input type="checkbox"/>	<input type="checkbox"/>
<410>	Fixed 0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420>	Mobile 0.0	<input type="checkbox"/>	<input type="checkbox"/>
<430>	Number of Complaints per 1,000 customers (broadband)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<440>	Fixed 0.0	<input type="checkbox"/>	<input type="checkbox"/>
<450>	Mobile 0.0	<input type="checkbox"/>	<input type="checkbox"/>
<500>	Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510>	47221ID510.pdf (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600>	Functionality in Emergency Situations (check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610>	47221ID610.pdf (attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700>	Company Price Offerings (voice) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<710>	Company Price Offerings (broadband) (complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<800>	Operating Companies and Affiliates (complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900>	Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/> (if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1000>	Voice Services Rate Comparability (check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1010>	47221ID1000.pdf (attach descriptive document)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1100>	Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/> (if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1200>	Terms and Condition for Lifeline Customers (complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet			
<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric H. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mosadane.com

<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
<111>	If your answer to Line <110> is yes, do you have an existing § 54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

472211D100.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	<input type="checkbox"/>
<114>	Report how much universal service (USF) support was received	<input type="checkbox"/>
<115>	How (USF) was used to improve service quality	<input checked="" type="checkbox"/>
<116>	How (USF) was used to improve service coverage	<input checked="" type="checkbox"/>
<117>	How (USF) was used to improve service capacity	<input checked="" type="checkbox"/>
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric M. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@moasads.com

[illegible]

[illegible]

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric N. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@moradana.com

[illegible]

[illegible]

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If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

[illegible]

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472321
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric H. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@cozadams.com

Please check this box to confirm no terrestrial backhaul
<1120> options exist within the supported area pursuant to § 54.313(G)

☐

Please check this box to confirm the reporting carrier offers
<1130> broadband service of at least 1 Mbps downstream and 256 kbps
upstream within the supported area pursuant to § 54.313(G)

☐

(1200) Terms and Condition for Lifeline Customers

FCC Form 481

Lifeline

OMB Control No. 3060-0986/OMB Control No. 3060-0819

Data Collection Form

July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric N. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@ncsads.com

472211D1210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP <http://online.fmtc.com/corporate/index.php?id:display=detail&ep=0&id=4651d70dc19a5b509663feb639af5767>

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric N. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@roadrunner.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2010> 2nd Year Certification (47 CFR § 54.313(b)(1)) ☐

<2011> 3rd Year Certification (47 CFR § 54.313(b)(2)) ☐

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

<2012> 2013 Frozen Support Certification ☐

<2013> 2014 Frozen Support Certification ☐

<2014> 2015 Frozen Support Certification ☐

<2015> 2016 and future Frozen Support Certification ☐

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

<2016> Certification Support Used to Build Broadband ☐

Connect America Phase II Reporting (47 CFR § 54.313(e))

<2017> 3rd year Broadband Service Certification ☐

<2018> 5th year Broadband Service Certification ☐

<2019> Interim Progress Certification ☐

<2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010> Study Area Code	472221
<015> Study Area Name	FARMERS MUTUAL TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Eric H. Votaw
<035> Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mcquadams.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan
 Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313(f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))
 (3014) If yes, does your company file the RUS annual report

(Yes/No) ☒ Yes ☒ No
 (Yes/No) ☒ Yes ☒ No

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☐
 (3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited?

(Yes/No) ☒ Yes ☒ No

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications: ☒
 (3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows: ☒
 (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit: ☒

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers: ☐
 (3023) Underlying information subjected to a review by an independent certified public accountant: ☐

(3024) Underlying information subjected to an officer certification: ☐

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

472221:03026.pdf

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

**Certification - Reporting Carrier
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric N. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	472221
<015> Study Area Name	FARMERS MUTUAL TEL
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Eric N. Votaw
<035> Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>Eric Votaw</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	Eric Votaw
Name of Reporting Carrier:	FARMERS MUTUAL TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/26/2014
Printed name of Authorized Officer:	Daniel Greig
Title or position of Authorized Officer:	General Manager
Telephone number of Authorized Officer:	2084524241 ext.
Study Area Code of Reporting Carrier:	472221 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	FARMERS MUTUAL TEL
Name of Authorized Agent or Employee of Agent:	Moss Adams, LLP
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/26/2014
Printed name of Authorized Agent or Employee of Agent:	Eric N. Votaw
Title or position of Authorized Agent or Employee of Agent:	Senior Manager
Telephone number of Authorized Agent or Employee of Agent:	2099556116 ext.
Study Area Code of Reporting Carrier:	472221 Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

LINE 100 INITIAL FIVE-YEAR SERVICE QUALITY IMPROVEMENT PLAN

REDACTED FOR PUBLIC INSPECTION

Response Line 510
Farmers Mutual Telephone Company
Study Area 472221

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) Farmers Mutual Telephone Company ("FMTC") is in compliance with the Idaho Public Utilities Commission's Telephone Customer Relations Rules, IDAPA 31.41.01 as well as the applicable FCC Service Quality Standards and Consumer Protection Rules. FMTC provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis. SMTA also conducts subscriber outreach regarding CPNI by periodically placing CPNI explanation messages into subscriber's bills. In addition FMTC trains staff on Red Flag issues on an annual basis. All company employees are required to sign and acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules.

Response Line 610
Farmers Mutual Telephone Company
Study Area 472221

Functionality in Emergency Situations:

Pursuant to 47 C.F.R. § 54.313(a)(6) and 47 C.F.R § 54.22(b)(4) as set forth in 47 C.F.R. § 54.202(a)(2) Farmers Mutual Telephone Company ("FMTC") meets the requirements to remain functional in emergency situations and has the following capabilities; Back-up power is provided to FMTC's central by use of a fixed generator and batteries that provide it with 8 hours of emergency power. In addition, FMTC's field electronics have 8 hours of back-up power by use of generators and batteries. FMTC also has SONET technology deployed in its core fiber optic network that is self-healing and will automatically reroute traffic should a fiber cut occur. FMTC also has diverse routing to adjacent telecommunication providers and telephone exchanges that provide FMTC the ability to reroute traffic in emergency situations. Lastly, FMTC is capable of managing traffic spikes resulting from emergency situations.

(700) Price Offerings including Voice Rate Data
Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric H. Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099551216 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mooseadams.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

[illegible]

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No: 3060-0819
July 2013

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Eric H. Votav
<035>	Contact Telephone Number - Number of person identified in data line <030>	2099556116 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votav@moaadama.com

[illegible]

Response to Line 1000
Farmers Mutual Telephone Company
Study Area 472221

Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Farmers Mutual Telephone Company ("FMTC") is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of \$46.96 as specified in Public Notice DA 14-384 issued on March 20, 2014. FMTC current total local end-user rate(s)¹ for its exchanges are as follows:

Fruitland of \$17.66 (which includes a local fee of \$17.50 and mandated state fees of \$0.16)
NuAcres of \$19.91 (which includes a local fee of \$19.75 and mandated state fee of \$0.16)

Neither of the above referenced exchanges are above the standard deviation as specified in the USF/ICC Transformation Order.²

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

² USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."

III. LIFELINE

A. GENERAL

Applicable to qualifying low-income subscribers to single party Residential service of the Company.

B. RATES

1. Baseline Lifeline is a reduction or credit in the local service charges normally paid by qualifying low-income consumers. The reduction to the normal residential one-party rates are as follows:

Residential Access Lines	Monthly Credit or Discount
Federal Baseline Lifeline Reduction Federally funded reduction in local rate	Subscriber line charge \$9.25
State Matching Local Rate Reduction	\$2.50

These reductions or credits are from the normal residential one-party service subscribed to by the consumer. The Federal baseline lifeline reduction shall be used to waive the consumer's Federal End-User Common Line Charge or Subscriber Line Charge.

In addition to the above Federal Service Discount, the State may provide an additional discount for eligible consumers, pursuant to Idaho code Title 56, Chapter 9. The State Discount is only provided if it is funded through the States Universal Service Fund or a surcharge upon customers.

In no case will the discount exceed the rate charged for the service subscribed to by each individual.

IV. LIFELINE, CONTINUED

B. RATES, CONTINUED

1. The following services are included:
 - a. Single party, voice grade access to the Public Switched Network
 - b. Access to emergency services
 - c. Access to operator services
 - d. Access to interexchange services, unless toll blocking is chosen
 - e. Access to directory assistance
 - f. Toll Blocking

C. ELIGIBILITY REQUIREMENTS

1. An applicant must meet all of the following criteria in order to qualify for Lifeline Service:

- a. The consumer must meet eligibility requirements established in Idaho Code, Title 56, Chapter 9.
- b. To qualify for Lifeline Service, the consumer must be a head of household and whose gross income is at or below one hundred and thirty-five percent (135%) of the Federal Poverty Limit.
- c. The customer must be recertified annually by the appropriate state agency.
- d. The premises at which the residential service is requested is the applicant's principle place of residence.
- e. There is only one telephone line serving the residential premises eligible for the credit. The residential premises shall consist of that portion of an individual house or building or one flat or apartment occupied by a single family or individuals functioning as one domestic unit.

IV. LIFELINE, CONTINUED

C. ELIGIBILITY REQUIREMENTS, CONTINUED

2. Lifeline will not be furnished on a Foreign Exchange (FX) basis.
3. Lifeline service shall not be disconnected for non-payment of toll charges.
4. If the consumer chooses "toll blocking, the company will not charge a service deposit. No toll blocking charges will be assessed to Lifeline subscribers.

D. FUNDING

The total cost of providing the State Lifeline program shall be funded from a monthly surcharge to each business and residential access line.

Residences receiving Lifeline assistance are exempt from the uniform monthly surcharge.

E. REGULATIONS

1. The Telephone Assistance Program credit will begin with the next billing cycle following the date the Company receives notification of customer qualification.
2. The regular service connection charge, move and change charge, and regulations applicable to the service offerings specified in the tariff will apply. The service connection charge and move and change charge to change to or from this program due to eligibility status will be waived.

III. LIFELINE, CONTINUED

E.REGULATIONS, CONTINUED

3. The lifeline credit will be subject to the following restrictions:
 - a. Applicant must be head of household or person whose name the property or rental agreement resides.
 - b. Lifeline credit will only be provided to the applicant' s principle residence.
 - c. The credit will only be applicable for one single residential access line.
4. The Company will offer Lifeline assistance only during such periods as reimbursement of the discount is available to the Company from Federal and/or State revenue sources.

V. IDAHO TELECOMMUNICATIONS SERVICE ASSISTANCE PROGRAM (IT SAP) SURCHARGE

A. RATES

The monthly surcharge is set at the amount ordered by the Idaho Public Utilities Commission.

B.CONDITIONS

- 1.A surcharge assessed on all access lines to contribute toward funding for the Idaho Telecommunications Service Assistance Program (ITSAP) or the State-matching portion of the Lifeline program.
2. The surcharge rate will remain in effect until otherwise modified canceled, or changed by the Commission.

LINE 3005 RATE OF RETURN DATA

REDACTED FOR PUBLIC INSPECTION